UNITED STATES SECURITIES AND EXCHANGE COM Washington, D.C. 205

UNIFORM LIMITED OFFERING EXEMPTION

NOTICE OF SALE OF SEC PURSUANT TO REGUE SECTION 4(6), AND



SEC USE ONLY							
Prefix	Serial						
DATE RECEIVED							

Name of Offering (check if this is an amer Convertible Note Offering	dment and name has char	ged, and indicate	change.) 128	8641
Filing Under (Check box(es) that apply):	Rule 504 Rule	505 🛛 Rule	506 Section 4(6) ULOE
Type of Filing: New Filing Amer	dment			
	A. BASIC IDENTIFIC	ATION DATA	· · · · · · · · · · · · · · · · · · ·	
1. Enter the information requested about the issue	er			
Name of Issuer (check if this is an amend	nent and name has changed,	and indicate change	.)	
Five 9, Inc			<u> </u>	
Address of Executive Offices	(Number and Street, City,	State, Zip Code)	Telephone Number (Incl	uding Area Code)
7901 Stoneridge Drive, Suite 200 CA 94	588	-	925-201-2000	-
Address of Principal Business Operations	(Number and Street, City,	State, Zip Code)	Telephone Number (Incl	uding Area Code)
(if different from Executive Offices) same as above	e		same as above	,
Brief Description of Business				
Telecommunications				
Type of Business Organization				
	d partnership, already formed	i		
		other 🔲	: limited liability company	•
☐ business trust ☐ limite	d partnership, to be formed			
	Month	Year		
Actual or Estimated Date of Incorporation or Org	anization: <u>03</u>	2001	_ ⊠Actual	□ Estimated
Jurisdiction of Incorporation or Organization: (E	nter two-letter U.S. Postal Se	ervice abbreviation f	or State: DE	
•	CN for Canada; F	N for other foreign ju	urisdiction)	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Brian Silverman Business or Residence Address (Number and Street, City, State, Zip Code) c/o Five 9, Inc. 7901 Stoneridge Drive, Suite 200 CA 94588 Promoter Beneficial Owner Check Box(es) that Apply: ⊠Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Robert Murphy Business or Residence Address (Number and Street, City, State, Zip Code) c/o Five 9, Inc. 7901 Stoneridge Drive, Suite 200 CA 94588 Promoter Beneficial Owner Check Box(es) that Apply: ☐ Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Mitchell Kertzman (Number and Street, City, State, Zip Code) Business or Residence Address c/o Hummer Winblad Venture Partners V, L.P., Two South Park, Second Floor, San Francisco, CA 94107 Promoter Beneficial Owner Check Box(es) that Apply: Executive Officer ☐ General and/or Managing Partner Full Name (Last name first, if individual) David Samuel Business or Residence Address (Number and Street, City, State, Zip Code) c/o Mosaic Venture Partners II, Limited Partnership, FlatIron Building, 49 Wellington St. East, 3rd Floor Toronto, ON Canada M5E1C9 Promoter Beneficial Owner Executive Officer Check Box(es) that Apply: ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Hummer Winblad Venture Partners V, L.P. Two South Park, Second Floor, San Francisco, CA 94107 Business or Residence Address (Number and Street, City, State, Zip Code) Two South Park, Second Floor, San Francisco, CA 94107 Promoter Beneficial Owner ☐ Executive Officer Director General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Mosaic Venture Partners II, Limited Partnership Business or Residence Address (Number and Street, City, State, Zip Code) FlatIron Building, 49 Wellington St. East, 3rd Floor Toronto, ON Canada M5E1C9 (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

					B. IN	FORMA	TION AB	OUT OFF	ERING				
												Ye	es No
1.	Has the iss	uer sold, o	or does the	issuer inte	end to sell,	to non-ac	credited in	vestors in	this offerir	ıg?			
	• •	·		Answe	r also in A	ppendix, (Column 2,	if filing ur	nder ULOI	Ξ.			
2.	What is the	e minimun	n investme	nt that will	l be accept	ed from ar	ny individu	ıal?				\$_	500,000
												Y	es No
3.	Does the o	ffering per	rmit joint c	wnership	of a single	unit?						`	
4.											ommis-	_	
	sion or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the												
	name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you												
	may set for						be fisied a	e associat	ed persons	or such a	DIORCI DI U	caici, you	
	,					•							
Ful	Name (Las	t name firs	st, if indivi	dual)					•				
Bus	iness or Res	sidence Ac	ldress (Nui	mber and S	Street, City	, State, Zi	p Code)				,		
Nor	ne of Associ	isted Brok	er or Deals	ar						<u>-</u>			
ivai	iic oi Associ	iated Diok	ci oi Dean	-1									
Stat	es in Which	Person L	isted Has S	Solicited or	r Intends to	Solicit P	urchasers						
	(Check "A	ll States" (or check in	dividual S	tates)					••••••			All States
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
	[IL]	[IN]	[AI]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	(MN)	[MS]	[MO]
	[MT]	[NE]	[NV]	[NH]	[NJ]	[MM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[AW]	[WV]	[WI]	[WY]	[PR]
Ful	l Name (Las	t name fir	st, if indivi	dual)									<u> </u>
Rus	siness or Res	sidence Ac	Idress (Nu	mber and S	Street City	State 7i	n Code)		1				
Du	siness of ices	sidelice 7 to	101033 (110	moer and s	onect, eng	, State, 21	p code)						
Nar	ne of Assoc	iated Brok	er or Deal	er									
Sta	tes in Which											F	7
													All States
	(AL)	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE] [MD]	[DC]	[FL] [MI]	[GA] [MN]	[HI]	[ID]
	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]		[MA] [ND]		[MN]	[MS] [OR]	[MO]
	(MT) (RI)	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[MM] [UT]	[NY] [VT]	[NC] [VA]	(WA)	[OH] [WV]	[WI]	(WY)	[PA] [PR]
					[1A]	[01]	[\ 1]	[M]	[WA]	[W V]	[W T]	[W I]	[47]
Ful	l Name (Las	t name fir	st, if indivi	dual)	•								
Bus	siness or Res	sidence Ac	idress (Nu	mber and S	Street, City	, State, Zi	p Code)						
					•								
Nai	ne of Assoc	iated Brok	er or Deal	er									
Sta	tes in Which	Person I	isted Has	Solicited o	r Intends t	o Solicit P	urchasers					·	
Jiu	(Check "A												All States
	(AL)	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[OM]
	[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[HO]	[OK]	[OR]	[PA]
	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING, PRICE, NUMBER OF INVESTORS, EXPENS	ES A	ND USE OF PROCI	EEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate Offering Price		Amount Already Sold
	Debt	\$	1,000,000	_ \$_	1,000,000
	Equity	\$			
	☐ Common ☐ Preferred	,			
	Convertible Securities (including warrants)	\$	-0-	\$_	-0-
	Partnership Interests	\$	-0-	\$	-0-
	Other (Specify)	\$	-0-	\$	-0-
	Total	\$	1,000,000	- \$	1.000,000
	Answer also in Appendix, Column 3, if filing under ULOE	-			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors		2	_ \$_	1,000,000
	Non-accredited Investors		-0-	_ \$_	-0-
	Total (for filings under Rule 504 only)		n/a	_ \$_	n/a
	Answer also in Appendix, Column 4, if filing under ULOE				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.		Tomose		Dallan Amazona
	Type of Offering		Type of Security		Dollar Amount Sold
	Rule 505		n/a	\$	n/a
	Regulation A		n/a	 \$	n/a-
	Rule 504		n/a-	\$	
	Total		N/a	- ·- \$	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	-		_ ~_	
	Transfer Agent's Fees		***************************************	□ \$	-0-
	Printing and Engraving Costs				
	Legal Fees.			<u> </u>	
	Accounting Fees				-0-
	Engineering Fees				
	Sales Commissions (specify finders' fees separately)				
	Other Expenses (identify) Finders' Fees				
	Total			□ \$_ ⊠ \$_:	

	C. OFFERING, PRICE, NUMBER O	OF INVESTORS, EXPENS	ES AND USE OF PRO	CEEDS
	b. Enter the difference between the aggregate price give Question 1 and total expenses furnished in response to Pa difference is the "adjusted gross proceeds to the issuer."	art C - Question 4.a. This		\$ 995,000
5.	Indicate below the amount of adjusted gross proceeds to to be used for each of the purposes shown. If the amount known, furnish an estimate and check the box to the left of the payments listed must equal the adjusted gross proceed response to Part C - Question 4.b above.	unt for any purpose is not f the estimate. The total of	Payments To Officers, Directors, & Affiliates	Payments To Others
	Salaries and fees		S -0-	\$0
	Purchase of real estate		S -0-	\$0
	Purchase, rental or leasing and installation of machine	ery and equipment	\$0-	\$0
	Construction or leasing of plant buildings and facilitie	es	S -0-	\$0
	Acquisition of other businesses (including the value o this offering that may be used in exchange for the asse issuer pursuant to a merger)	ets or securities of another	□ \$ <u>-0-</u>	\$0-
	Repayment of indebtedness		S -0-	\$0
	Working capital		 \$ <u>-</u> 0	\$995,000
•	Other (specify):		S0-	\$0
	Column Totals Total Payments Listed (column totals added)		□ \$ -0- □ \$ -0- □ \$ 99	⋈ \$ <u>995,000</u>
	D. F	FEDERAL SIGNATURE		
sig	e issuer has duly caused this notice to be signed by the under nature constitutes an undertaking by the issuer to furnish to the formation furnished by the issuer to any non-accredited invest	he U.S. Securities and Excha	inge Commission, upon	
	e 9, Inc.	Signature AM #2		Date February 10, 2005
	ne of Signer (Print or Type) n Marlow	Title of Signer (Print or Typ Attorney	e)	

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNATURE	
1.		ently subject to any of the disqualification provisio	
		See Appendix, Column 5, for state response.	
2.	The undersigned issuer hereby undertakes to to (17 CFR 239.500) at such times as required by	furnish to any state administrator of any state in state law.	which this notice is filed, a notice on Form D
3.	The undersigned issuer hereby undertakes to offerees.	furnish to the state administrators, upon written	request, information furnished by the issuer to
4.		uer is familiar with the conditions that must be s nich this notice is filed and understands that the is ions have been satisfied.	
	e issuer has read this notification and knows the y authorized person.	contents to be true and has duly caused this notic	e to be signed on its behalf by the undersigned
	uer (Print or Type) re, Inc.	Signature Int H2	Date February 10, 2005
	me of Signer (Print or Type)	Title of Signer (Print or Type) Attorney	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

ALLENDIA										
1		2	3			4		Disquali Under Sta	fication	
		to call	Type of security					Under Sta	ite ULOE	
}		d to sell accredited	and aggregate offering price		Type of	(if yes, attach explanation of				
		rs in State	offered in state		Type of investor and amount purchased in State				waiver granted	
		3-Item 1)	(Part C-Item 1)		(Part	(Part E-	Item 1)			
				Number of Accredited		Number of Non-				
State	Yes	No	Convertible Note	Investors	Amount	Accredited Investors	Amount	Yes	No	
IL										
NE										
NV										
NH										
NJ NM										
NY										
NC										
ND										
ОН					<u> </u>					
OK										
OR										
PA										
RI										
SC										
SD										
TN										
TX										
UT										
VT										
VA										
WA	ļ									
WI										
WY										
PR										
110	<u> </u>		<u></u>	<u> </u>						